BEFORE THE DIVISION OF MEDICAL QUALITY MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA

In the Matter of the Accusation Against:))
CHARLOTTE DEBORAH SCANLON, M.	D.) File No. 16-2003-146995
Physician's and Surgeon's Certificate No. G86430)))
Respondent.))
DE	CISION
The attached Stipulated Surrender of Order of the Division of Medical Quality of of Consumer Affairs, State of California.	of License is hereby adopted as the Decision and the Medical Board of California, Department
This Decision shall become effective	at 5:00 p.m. on October 26, 2004.
JT IS SO ORDERED October	19, 2004.
M B	EDICAL BOARD OF CALIFORNIA y:

Panel B

Division of Medical Quality

1	BILL LOCKYER, Attorney General of the State of California				
2	JANE ZACK SIMON, State Bar No. 116564 Deputy Attorney General				
3	California Department of Justice				
	455 Golden Gate Avenue, Suite 11000 San Francisco, CA 94102-7004				
4	Telephone: (415) 703-5544 Facsimile: (415) 703-5480				
5					
6	Attorneys for Complainant				
7	BEFORE THE				
	MEDICAL ROARD OF CALIFORNIA				
8	DEPARTMENT OF CONSUMER AFFAIRS STATE OF CALIFORNIA				
9					
10	In the Matter of the Accusation Against:				
11	CHARLOTTE DEBORAH SCANLON, M.D. Case No.16-2003-146995 P.O. Box 7508				
12	Colorado Springs, CO 80933				
	STIPULATED SURRENDER OF				
13	LICENSE				
14	Physician and Surgeon's				
15	Certificate No. G86430				
16					
17					
	Respondent.				
18					
19	IT IS HEREBY STIPULATED AND AGREED by and between the parties in this				
20	proceeding that the following matters are true:				
21	1. David T. Thornton (Complainant) is the Executive Director of the Medical				
22.					
	Board of California, and maintains this action solely in his official capacity. Complainant is				
23	represented in this matter by Bill Lockyer, Attorney General of the State of California, by Jane				
24	Zack Simon, Deputy Attorney General.				
25	2. Charlotte Deborah Scanlon, M.D. (respondent) is represented in this				
26	proceeding by Linda L. Siderius of McConnell, Siderius, Fleischner, Houghtaling & Craigmile,				
27	2401 15 th Street, Suite 300, Denver, Colorado 80202.				

- 1 3. Respondent has received, read, discussed with counsel and understands the
- 2 Accusation which is presently on file and pending in case number 16-2003-146995 before the
- Board, a copy of which is attached as Exhibit A.
- 4. Respondent has carefully read, discussed with counsel, and understands
- 5 the charges and allegations in Accusation No. 16-2003-146995. Respondent also has carefully
- 6 read, discussed with counsel and understands the effects of this Stipulated Surrender of License.
- 7 5. Respondent is fully aware of her legal rights in this matter, including the
- 8 right to a hearing on the charges and allegations in the Accusation; the right to be represented by
- 9 counsel, at her own expense; the right to confront and cross-examine the witnesses against her;
- 10 the right to present evidence and to testify on her own behalf; the right to the issuance of
- subpoenas to compel the attendance of witnesses and the production of documents; the right to
- 12 reconsideration and court review of an adverse decision; and all other rights accorded by the
- 13 California Administrative Procedure Act and other applicable laws.
- 14 Respondent voluntarily, knowingly, and intelligently waives and gives up
- 15 each and every right set forth above.
- 7. Respondent agrees that based on the action taken by the Colorado State
- 17 Board of Medical Examiners, cause exists to discipline her California physician and surgeon's
- 18 certificate pursuant to Business and Professions Code sections 141 and 2305. Respondent lives
- 19 in Colorado. She is in poor health, and has no intention of practicing medicine in California in
- 20 the future. She therefor wishes to surrender her California license.
- 21 8. Respondent understands that by signing this stipulation she is enabling the
- 22 Medical Board of California to issue its order accepting the surrender of license without further
- 23 process. She understands and agrees that Board staff and counsel for complainant may
- 24 communicate directly with the Board regarding this stipulation, without notice to or participation
- 25 by respondent or her counsel. In the event that this stipulation is rejected for any reason by the
- 26 Board, it will be of no force or effect for either party. The Board will not be disqualified from
- 27 further action in this matter by virtue of its consideration of this stipulation.

1	9. Upon acceptance of this stipulation by the Board, respondent understands				
2	that she will no longer be permitted to practice as a physician and surgeon in California, and al				
3	agrees to surrender and cause to be delivered to the Board any license and wallet certificate in				
4	her possession before the effective date of the decision.				
5	10. The admissions made by respondent herein are only for the purposes of				
6	this proceeding, or any other proceedings in which the Medical Board or other professional				
7	licensing agency is involved, and shall not be admissible in any other criminal or civil				
8	proceeding.				
9	11. Respondent fully understands and agrees that if she ever files an				
10	application for relicensure or reinstatement in the State of California, the Board shall treat it as a				
11	petition for reinstatement, and respondent must comply with all laws, regulations and procedure				
12	for reinstatement of a revoked license in effect at the time the petition is filed.				
13	12. Respondent understands that she may not petition for reinstatement as a				
14	physician and surgeon for a period of three (3) years from the effective date of his surrender.				
15	Information gathered in connection with Accusation number 16-2003-146995 may be				
16	considered by the Division of Medical Quality in determining whether or not the grant the				
17	petition for reinstatement. For the purposes of the reinstatement hearing, the allegations				
18	contained in Accusation number 16-2003-146995 shall be deemed to be admitted by respondent				
19	and respondent waives any and all defenses based on a claim of laches or the statute of				
20	limitations.				
21	13. The parties understand and agree that facsimile copies of this Stipulated				
22	Surrender of License and Order, including facsimile signatures thereto, shall have the same force				
23	and effect as the originals.				
24	<u>ACCEPTANCE</u>				
-25	I have carefully read the above stipulation, and have discussed it with my				
26	attorney, Linda L. Siderius. I enter into it freely and voluntarily and with full knowledge of its				
27	force and effect, do hereby surrender my Physician and Surgeon's Certificate Number G86430 to				
20	the Division of Medical Quality, Medical Board of California, for its formal acceptance. By				

ī	signing this supulation to suffender my license, I recognize that upon its formal acceptance by				
2	the Board, I will lose all rights and privileges to practice as a physician and surgeon in the State				
3	of California and I also will cause to be delivered to the Board any license and wallet certificate				
4	in my possession before the effective date of the decision.				
5					
6	DATED: 9-29-04.				
7	Charlotte D. Scaneon wo				
8	CHARLOTTE DEBORAH SCANLON, M.D. Respondent				
9	APPROVAL				
10	MINOVAL				
11	I have fully read and discussed with respondent Charlotte Deborah Scanlon, M.D.				
12	the provisions of this Stipulated Surrender of License. I approve its form and content.				
13 14	DATED: 9-28-04				
15	\mathcal{L}				
16	LINDA L. SIDERIUS				
17	McConnell, Siderius, Fleischner, Houghtaling & Craigmile				
18	Attorneys for Respondent				
19					
20	111				
21					
22	111				
23	111				
24					
25					
26					
27					

1	ENDORSEMENT				
2					
3 4	The foregoing Stipulated Surrender of License is hereby respectfully submitted				
5	for consideration by the Division of Medical Quality, Medical Board of California.				
6	DATED: 10/4/2004				
7	DATED: 10191004.				
8	BILL LOCKYER, Attorney General				
9	of the State of California				
10	JANE ZACK SIMON				
11	Deputy Attorney General				
12					
13	Attorneys for Complainant				
14					
15					
16					
17					
18	·				
19					
20					
21					
22					
23					
24					
25					
26					
27					

1	BILL LOCKYER, Attorney General FILED of the State of California					
2	JANE ZACK SIMON Deputy Attorney General [SBN 116564] STATE OF CALIFORNIA MEDICAL BOARD OF CALIFORNIA					
3	455 Golden Gate Avenue, Suite 11000 SACRAMENTO Quilly 31. 20 1					
4	San Francisco, California 94102 Telephone: (415) 703-5544 BY More ANALY					
_	Facsimile: (415) 703-5480					
5 6	Attorneys for Complainant					
7	BEFORE THE					
8	DIVISION OF MEDICAL QUALITY MEDICAL BOARD OF CALIFORNIA DEPARTMENT OF CONSUMER AFFAIRS					
9 10	STATE OF CALIFORNIA					
11	In the Matter of the Accusation Against:) Case No. 16-2003-146995					
)					
12	CHARLOTTE DEBORAH SCANLON, M.D., P.O. Box 7508					
13	Colorado Springs, CO 80933) ACCUSATION					
14	Physician and Surgeon's					
15	Certificate No. G86430					
16	Respondent.					
17	,, ,					
18	The Complainant alleges:					
19	<u>PARTIES</u>					
20	1. Complainant, Ronald Joseph, is the Executive Director of the Medical					
21	Board of California (hereinafter the "Board") and brings this accusation solely in his official					
22	capacity.					
23	2. On or about March 6, 2002, Physician and Surgeon's Certificate No.					
24	G86430 was issued by the Board to Charlotte Deborah Scanlon, M.D (hereinafter					
25	"respondent"). Said certificate is renewed and current with an expiration date of December 31,					
26	2003.					
27	//					

III

JURISDICTION

- 3. This accusation is brought before the Division of Medical Quality of the Medical Board of California, Department of Consumer Affairs (hereinafter the "Division"), under the authority of the following sections of the California Business and Professions Code (hereinafter "Code") and/or other relevant statutory enactment:
 - A. Section 2227 of the Code provides in part that the Board may revoke, suspend for a period of not to exceed one year, or place on probation, the license of any licensee who has been found guilty under the Medical Practice Act, and may recover the costs of probation monitoring if probation is imposed.
 - B. Section 125.3 of the Code provides, in part, that the Board may request the administrative law judge to direct any licentiate found to have committed a violation or violations of the licensing act, to pay the Board a sum not to exceed the reasonable costs of the investigation and enforcement of the case.
 - C. Section 2305 of the Code provides, in part, that the revocation, suspension, or other discipline, restriction or limitation imposed by another state upon a license to practice medicine issued by that state, that would have been grounds for discipline in California under the Medical Practice Act, constitutes grounds for discipline for unprofessional conduct.
 - D. Section 141 of the Code provides:
 - "(a) For any licensee holding a license issued by a board under the jurisdiction of a department, a disciplinary action taken by another state, by any agency of the federal government, or by another country for any act substantially related to the practice regulated by the California license, may be ground for disciplinary action by the respective state licensing board. A certified copy of the record of the disciplinary action taken against the licensee by another state, an agency of the federal government, or by another country shall be conclusive evidence of the events related therein.

"(b) Nothing in this section shall preclude a board from applying a specific statutory provision in the licensing act administered by the board that provides for discipline based upon a disciplinary action taken against the licensee by another state, an agency of the federal government, or another country."

- E. Section 14124.12(a) of the Welfare & Institutions Code provides in pertinent part that upon written notice of the Medical Board of California a physician and surgeon's medical license has been placed on probation as a result of a disciplinary action, no Medi-Cal claim for the type of surgical service or invasive procedure giving rise to the probationary order and performed on or after the effective—date of said probationary order or during the period of—probation shall be reimbursed, except upon a prior determination that compelling circumstances warrant the continuance of reimbursement during the probationary period for procedures other than those giving rise to the probationary order.
- 4. Respondent is subject to discipline within the meaning of section 141 and is guilty of unprofessional conduct within the meaning of section 2305 as more particularly set forth hereinbelow.

FIRST CAUSE FOR DISCIPLINE

(Discipline, Restriction, or Limitation Imposed by Another State)

5. On or about May 14, 2003, the State Board of Medical Examiners, State of Colorado issued a Stipulation and Final Agency Order regarding respondent's license to practice medicine in Colorado. The Colorado Board made findings that respondent has neuropsychological problems that are probably developmental in origin and that appear to impact her visual memory, incidental learning, visual perception, tactual/motor skills, ability to consider situations from multiple perspectives and judgment. The Colorado Board further found that respondent prescribed morphine for a patient with whom she shared a residence, that the morphine was not intended for that patient's use, but was for the patient to administer to other patients of respondent. The Colorado Board also found that pharmacy records indicate that

DATED: July 31, 2003

RONALD JOSEPH
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California

Complainant

BEFORE THE STATE BOARD OF MEDICAL EXAMINERS STATE OF COLORADO

STIPULATION AND FINAL AGENCY ORDER

IN THE MATTER OF THE DISCIPLINARY PROCEEDING REGARDING THE LICENSE TO PRACTICE MEDICINE IN THE STATE OF COLORADO OF CHARLOTTE D. SCANLON, M.D., LICENSE NUMBER 31977,

Respondent.

IT IS HEREBY STIPULATED and agreed by and between Inquiry Panel A ("Panel") of the Colorado State Board of Medical Examiners ("Board") and Charlotte D. Scanlon, M.D. ("Respondent") as follows:

JURISDICTION AND CASE HISTORY

- 1. Respondent was licensed to practice medicine in the state of Colorado on July 16, 1992 and was issued license number 31977, which Respondent has held continuously since that date.
- 2. The Panel and the Board have jurisdiction over Respondent and over the subject matter of this proceeding.
- 3. On November 13, 2002, the Panel reviewed case number 5102011850. The Panel thereupon referred the matter to the Attorney General pursuant to § 12-36-118(4)(c)(IV), C.R.S.
- 4. It is the intent of the parties and the purpose of this Stipulation and Final Agency Order ("Order") to provide for a settlement of all matters set forth in case number 5102011850 without the necessity of holding a formal disciplinary hearing. This Order constitutes the entire agreement between the parties, and there are no other agreements or promises, written or oral, which modify, interpret, construe or affect this Order.

5. Respondent understands that:

- a. Respondent has the right to be represented by an attorney of the Respondent's choice and is so represented;
- b. Respondent has the right to a formal disciplinary hearing pursuant to § 12-36-118(5), C.R.S.
- c. By entering into this Order, Respondent is knowingly and voluntarily giving up the right to a hearing, admits the facts contained in this Order, and relieves the Panel of its burden of proving such facts; and
- d. Respondent is knowingly and voluntarily giving up the right to present a defense by oral and documentary evidence, and to cross-examine witnesses who would testify on behalf of the Panel.

- 6. Respondent specifically admits and agrees as follows:
 - a. Respondent has neuropsychological problems that are probably developmental in origin and that appear to impact her visual memory, incidental learning, visual perception, tactual/motor skills, ability to consider situations from multiple perspectives, and judgment. Respondent believes she has been able to accommodate the neurological problems with skill and efficiency. She believes she has been able to practice without difficulty relating to her neurological status.
 - b. For many years beginning in 1990, Respondent served as the primary care physician for LB, with whom Respondent had an acquaintance and shared a residence. Respondent maintained medical records regarding her treatment of LB.
 - c. Respondent prescribed morphine that was not intended for L.B.'s use under L.B.'s name.
 - d. LB provided delegated medical services for Respondent pursuant to § 12-36-106(3)(1), C.R.S. Respondent provided LB with the prescription so that LB could administer morphine to Respondent's patients at Respondent's direction and supervision. LB is not authorized by law to prescribe drugs.
 - e. Pharmacy records indicate that Respondent prescribed monthly phenobarbital for LB, and Respondent states that she did not intend to prescribe phenobarbital for LB. Respondent disputes the accuracy of these records as she denies that she ever prescribed Phenobarbital for herself.
- 7. Respondent admits that the conduct set forth above constitutes unprofessional conduct as defined in § § 12-36-117 (1)(o) and 117(1)(p), C.R.S.
- 8. Based upon the above, the Panel is authorized by § 12-36-118(5)(g)(III), C.R.S. to order probation and such conditions upon Respondent's practice that it deems appropriate.

PROBATIONARY TERMS

- 9. Respondent's license to practice medicine is hereby placed on probation for a period of five years commencing on the effective day of the Order. All terms of probation shall be effective throughout the probationary period.
- 10. The probationary period may be tolled and extended beyond five years in the event that a practice monitor is not providing timely monitoring of Respondent's practice as set forth below in this Order.

CPEP EDUCATION PROGRAM

- 11. Within 30 days of the effective date of this Order, Respondent shall contact the Center for Personalized Education for Physicians ("CPEP") for the purposes of an assessment. The assessment will determine whether Respondent shall undergo an education plan. Respondent shall complete and sign the written assessment within 120 days of the effective date of this Order.
- 12. In the event that the assessment indicates Respondent should undergo an education plan, Respondent shall enroll in a CPEP education plan within 180 days of the effective date of this Order. Education plans typically take four to six weeks to create after enrollment. Respondent shall cause CPEP to send a copy of the education plan to the Panel. Respondent shall successfully complete the educational activities set out in the education plan, including any final evaluations or re-evaluations, within the time set out by CPEP, but in no event, more than two years from the effective date of this Order. All instructions made by CPEP shall constitute terms of this Order and shall be complied with within the time periods set out by CPEP.
- 13. Upon successful completion of the education plan, including any final assessments, Respondent shall provide the Panel with written proof from CPEP of such successful completion.

MONITORING BY CPHP

- 14. During the probationary period, Respondent shall comply with any and all evaluation and/or treatment ordered or recommended by the Colorado Physician Health Program ("CPHP"). Such evaluation and/or treatment may include but shall not be limited to medical, psychological or neuropsychological testing and/or evaluations, and/or medical, psychological and/or neuropsychological treatment. Throughout the probationary period, all instructions to Respondent by CPHP shall constitute terms of this Order, and must be complied with. Failure to comply with such instructions shall constitute a violation of this Order.
- 15. CPHP shall submit quarterly written reports to the Panel. The reports shall briefly describe Respondent's evaluation and/or treatment with CPHP. The reports shall also state whether Respondent is in compliance with this Order. If at any time CPHP has reasonable cause to believe that Respondent has violated the terms of this Order, is unable to practice with skill and with safety to patients or has committed unprofessional conduct as defined in § 12-36-117(1), CPHP shall immediately inform the Panel.
- 16. Within 30 days of the effective date of this Order, Respondent shall complete an unrestricted release permitting CPHP to disclose to the Panel all privileged information concerning Respondent in its possession, including information generated by other sources. Any revocation of such release by Respondent shall constitute a violation of this Order. In the event Respondent does revoke such release, CPHP may, due to confidentiality concerns, feel compelled to refuse to acknowledge Respondent's participation in CPHP. CPHP's refusal to acknowledge Respondent's participation with that organization shall constitute a violation of this Order.
- 17. It is the responsibility of the Respondent to provide information to CPHP in a timely and complete manner and to assure that CPHP's reports are timely and complete.

PROFESSIONAL BOUNDARIES COURSE

- 18. Within the time recommended by CPHP, Respondent shall successfully complete a professional boundaries course recommended by CPHP. All recommendations of CPHP with respect to the boundaries course shall constitute terms of this Order.
- 19. Upon successful completion of the Boundaries Course, Respondent shall provide the Panel with written proof from CPHP of such successful completion.

PRACTICE MONITORING

- 20. During the probationary period, a "practice monitor" shall monitor Respondent's medical practice. Within 45 days of the effective date of this Order, Respondent shall nominate, in writing, a proposed practice monitor for the Panel's approval. The nominee shall be a physician licensed by the Board and currently practicing medicine in Colorado. The nominee shall have no financial interest in Respondent's practice of medicine. The nominee must be knowledgeable in Respondent's area of practice. If Respondent is board certified in an area of practice, it is preferred, but not required, that the nominee be board certified by that same board. If the Respondent has privileges at hospitals, it is preferred, but not required, that the nominee have privileges at as many of those same hospitals as possible. The Board shall not have disciplined the nominee.
- 21. Respondent's nomination for practice monitor shall set forth how the nominee meets the above criteria. With the written nomination, Respondent shall submit a letter signed by the nominee as well as a current curriculum vitae of the nominee. The letter from the nominee shall contain a statement from the nominee indicating that the nominee has read this Order and understands and agrees to perform the obligations set forth herein. The nominee must also state that the nominee can be fair and impartial in the review of the Respondent's practice.
 - 22. Upon approval by the Panel, the practice monitor shall perform the following:
- a. Each month, the practice monitor shall visit all the offices at which Respondent practices medicine and review at least five charts maintained by Respondent. The practice monitor shall make reasonable efforts to insure that Respondent has no notice of which charts will be selected for review. The practice monitor is authorized to review such other medical records maintained by Respondent as the practice monitor deems appropriate.
- b. Each month, the practice monitor shall review at least five hospital charts of patients whom Respondent has admitted to hospitals. If Respondent has admitted fewer than five patients, the practice monitor shall review all the patients so admitted, if any. The practice monitor shall make reasonable efforts to insure that Respondent has no notice of which charts will be selected for review. The practice monitor is authorized to review such other hospital charts as the practice monitor deems appropriate.
 - c. The practice monitor shall submit quarterly written reports to the Panel.
 - d. The practice monitor's reports shall include the following:
 - a. a description of each of the cases reviewed; and

- b. as to each case reviewed, the practice monitor's opinion whether Respondent is practicing medicine in accordance with generally accepted standards of medical practice.
- 23. If at any time the practice monitor believes Respondent is not in compliance with this Order, is unable to practice with skill and with safety to patients or has otherwise committed unprofessional conduct as defined in § 12-36-117(1), C.R.S., the practice monitor shall immediately inform the Panel.
- 24. It is the responsibility of Respondent to assure that the practice monitor's reports are timely and complete. Failure of the practice monitor to perform the duties set forth above may result in a notice from Board staff requiring the nomination of a new practice monitor. Upon such notification, Respondent shall nominate a new practice monitor according to the procedure set forth above. Respondent shall nominate the new monitor within 30 days of such notice. Failure to nominate a new monitor within 45 days of such notification shall constitute a violation of this Order.

TOLLING OF THE PROBATIONARY PERIOD WHERE PRACTICE MONITORING IS NOT IN EFFECT

- 25. If a practice monitor recommended by Respondent and approved by the Panel does not commence practice monitoring within three months of the effective date of the Order, the period of probation shall be tolled for the time the Order is in effect and Respondent's practice is not being monitored by the practice monitor. Additionally if the Respondent is required to nominate a new practice monitor, the period of probation shall be tolled for any period of time during which a practice monitor is not monitoring Respondent's practice.
- 26. Unless otherwise specified, all terms of the Order and all terms of probation shall remain in effect regardless of whether the probationary period has been tolled from the date on which this Order becomes effective until the date on which probation is terminated.

TERMINATION FROM PRACTICE MONITORING

27. After successful completion of the CPEP education plan, including any final evaluations, Respondent may petition the Panel for early termination of practice monitoring. Such a petition must be accompanied by a recent evaluation of Respondent's safety to practice from a medical/psychiatric by CPHP. The parties agree that the Panel's decision regarding such a petition shall be made in the sole discretion of the Panel and shall be unreviewable.

OUT OF STATE PRACTICE

28. Respondent may wish to leave Colorado and practice in another state. At any time, whether to practice out of state, or for any other reason, Respondent may request that the Board place Respondent's license on inactive status as set forth in § 12-36-137, C.R.S. Upon the approval of such request, Respondent may cease to comply with practice monitoring only. If Respondent requests an inactive status within 30 days of the effective date of this Stipulation, the requirement to participate in CPEP shall also be tolled until such time as applies to reactive her license. Failure to comply with practice monitoring while inactive shall not constitute a violation of this Order. While

inactive, Respondent must comply with all other provisions of this Order. Unless Respondent's license is inactive, Respondent must comply with the practice monitoring provision, irrespective of Respondent's location. The probationary period will be tolled for any period of time Respondent's license is inactive.

29. Respondent may resume the active practice of medicine at any time as set forth in § 12-36-137(5), C.R.S. With such request, Respondent shall nominate a practice monitor as provided above. Respondent shall be permitted to resume the active practice of medicine only after approval of the practice monitor.

TERMINATION OF PROBATION

30. Upon the expiration of the probationary period, Respondent may request restoration of Respondent's license to unrestricted status. If Respondent has complied with all terms of probation and all terms of this Order, and if Respondent's probationary period has not been tolled, such release shall be granted by the Panel in the form of written notice.

TERMS OF THE ORDER

- 31. The terms of this Order were mutually negotiated and determined. Both parties acknowledge that they understand the legal consequences of this Order; both parties enter into this Order voluntarily; and both parties agree that no term or condition of this Order is unconscionable.
- 32. This Order shall be effective upon approval by the Panel and signature by a Panel member. Respondent acknowledges that the Panel may choose not to accept the terms of this Order and that if the Order is not approved by the Panel and signed by a Panel member, it is void. Unless otherwise specified, the terms of the Order and terms of probation shall remain in effect. All costs and expenses incurred by Respondent to comply with this Order shall be the sole responsibility of Respondent, and shall in no way be the obligation of the Board or Panel.
 - 33. Respondent shall obey all state and federal laws.
- 34. So that the Board may notify hospitals of this agreement pursuant to § 12-36-118(13), C.R.S., Respondent presently holds privileges at the following hospitals:

•	PENROSE	HOSPITAL	
-			
	······	<u> </u>	

35. This Order and all its terms shall have the same force and effect as an order entered after a formal hearing pursuant to § 12-36-118(5)(g)(III), C.R.S. except that it may not be appealed. Failure to comply with the terms of this Order may be sanctioned by the Inquiry Panel as set forth in § 12-36-118(5)(g)(IV), C.R.S. This Order and all its terms also constitute a valid board order for purposes of § 12-36-117(1)(u), C.R.S. In addition to any other sanction

that may be imposed, failure to comply with the terms of this Order shall toll the probationary period.

- 36. This Order shall be admissible as evidence at any future hearing before the Board.
- 37. During the pendency of any action arising out of this Order, the obligations of the parties shall be deemed to be in full force and effect and shall not be tolled.
- 38. Upon becoming effective, this Order shall be open to public inspection and shall be reported the Federation of State Medical Boards, the National Practitioner Data Bank/Healthcare Integrity and Protection Data Bank and as otherwise required by law. The Order shall also be made public pursuant to Board policies and procedures.

Charlotte D. Scanlon, M.D.

by Charles Programment of the Commission Expires

NOTARY PUBLIC

My commission expires

Ozologo My commission expires

THE FOREGOING Stipulation and Final Agency Order is approved and effective this

day of My day of

FOR THE COLORADO STATE BOARD OF MEDICAL EXAMINERS

INQUIRY PANEL A

APPROVED AS TO FORM:

Mcconnell, Siderius, Fleischner, Houghtaling & Craigmile, LLC

I INDAT SIDERILIS

2401 15th Street, Suite 300 Denver, CO 80202 303-458-9535 (Direct) 303-480-0400 (Main) 303-458-9520 (Fax) KEN SALAZAR Attorney General

ANDIA BRETT GOLDIN, 23116*

Assistant Attorney General
Business and Licensing Section

Attorneys for Inquiry Panel A

1525 Sherman Street, 5th Floor Denver, Colorado 80203 Telephone: (303) 866-5463

FAX: (303) 866-5395 *Counsel of Record